

REPORTS INVENTORY				CONTROL NO.	
PREPARE IN DUPLICATE				DDS/OL/LSD 11	
1. TITLE OF REPORT (if a fill-in report include Form No.)				2. TYPE OF REPORT	
Consolidated Memorandum Receipt (CMR) (7811)				<input type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input checked="" type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL	TRAINING	X ADMIN. GENERAL	
		LOGISTICS	SECURITY	OTHER (specify)	
		MEDICAL	FINANCE		
4. NO. OF COPIES PREPARED		5. FREQUENCY (weekly, monthly, quarterly, etc.)		6. DISTRIBUTION (No. of components not number of copies)	
2		Semi-annually		Supply Division; LSD	
7. FORMAT (memorandum, form computer print-out, etc)		8. ADP PROCESSING		9. DIRECTIVE AUTHORITY REQUIRING REPORT	
IBM		<input checked="" type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <input type="checkbox"/> NO		<div style="border: 1px solid black; width: 150px; height: 20px;"></div> STAT	
10. PREPARING COMPONENT (include lowest level contributing information to report)			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)		
OC/LSD (Dining Room Branch)			IBM		

12. COST FACTORS

A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT	X	TIMES PREPARED	=	COST PER YEAR
GS-12.5	\$7.73		1		\$7.73		2		\$15.46

B. COSTS OF COMPUTER PRODUCED REPORTS

--	--	--	--	--	--

2 TOTAL COSTS PER YEAR \$15.46

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

Delegation of Authority to Custodian with verification.

The records are designed to provide the activity with a simple control of property transactions with respect to units of accountable property and the monetary value of each. Acquisition and transfer of property should be shown as an increase or decrease. The location and serial number of each unit must be given.